24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
JAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
End Citizens United	C C00573261
Check if X 24-hour report 48-hour report New report Amends report filed	on Man / Dab / Yayayay
Full Name of Payee Mission Control	Date of Public Distribution/Dissemination
	10 19 2016
Mailing Address 624 Hebron Ave	Amount
Bldg 3 Suite 200	
City State Zip Code Glastonbury CT 06033-2470	24359.00 Transaction ID : VSGDK9TM6F3
- Classification of the control of t	Date of Disbursement or Obligation
Purpose of Expenditure Printing and postage (estimated) Category/ Type	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District: 00
HECK, JOE, , ,	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought Disb. 274359.00 Disb. 2016	ursement For: Primary X General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Mission Control	M = M / D = D / Y = Y = Y
Mailing Address 624 Hebron Ave	10 23 2016
Bldg 3 Suite 200	Amount
City State Zip Code	32139.64
Glastonbury CT 06033-2470	Transaction ID: VSGDK9TM6H9 Date of Disbursement or Obligation
Purpose of Expenditure Printing and postage (estimated) Category/ Tires	M M / D D / Y Y Y Y
Type	10 21 2016
	e Sought: House District: 03
TARKANIAN, DANNY, , ,	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought Disb 2016	ursement For: Primary General Other (specify) Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	56498.64
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
	0 21 2016
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
End Citizens United	C C00573261	
	O	
Check if 24-hour report 48-hour report New report Amends report file	d on M M / D D / Y Y Y Y Y	
Full Name of Payee Mothership Strategies	Date of Public Distribution/Dissemination	
, ,	10 21 2016	
Mailing Address 2413 20th St NW	Amount	
City State Zip Code	250000.00	
Washington DC 20009-5453	Transaction ID : VSGDK9T9QS1 Date of Disbursement or Obligation	
Purpose of Expenditure Digital media buy and production expense (estimated) Category/ Type	10 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate	ce Sought: House District: 00	
MASTO, CATHERINE CORTEZ, , ,	President Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought Dist 274359.00	oursement For: Primary General Other (specify)	
Full Name of Payee	Date of Public Distribution/Dissemination	
Wildfire Contact LLC	10 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 400 E Court Ave		
Ste 126	Amount	
City State Zip Code	19149.41	
Des Moines IA 50309-2000	Transaction ID : VSGDK9TM6E5 Date of Disbursement or Obligation	
Purpose of Expenditure Printing and postage (estimated) Category/ Type	10 20 2016	
Name of Federal Candidate Support Office	ce Sought: House District: 08	
Mills, Stewart, , ,	President Senate State: MN	
Calendar Year-To-Date Per Election for Office Sought Disl 201		
. S. Eloculon Ici Simos Godgin	Other (specify) -	
(a) SUBTOTAL of Itemized Independent Expenditures	269149.41	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Foucart, Brian, , , [Electronically Filed] Date	10 21 2016	
Oignataio		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 4 FOR SE OF FORM 24/48		
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
End Citizens United	C C00573261		
Check if X 24-hour report 48-hour report New report Amends report filed on	= M / D = D / Y = Y = Y		
E-II Name of Proces			
Wildfire Contact LLC	of Public Distribution/Dissemination		
Mailing Address 400 E Court Ave	nt		
Ste 126	00000 70		
	30908.70 action ID : VSGDK9T9QV7 of Disbursement or Obligation		
Purpose of Expenditure Category/	10 21 2016		
Name of Federal Candidate Support Office Sought	t: 🗶 House District: 10		
Dold, Jr., Robert James, , ,			
Calendar Year-To-Date Per Election for Office Sought Disbursement 2016 Ot	t For: Primary X General ther (specify) ▶		
	of Public Distribution/Dissemination		
	10 28 2016		
Mailing Address 400 E Court Ave	nt		
Ste 126			
City State Zip Code Des Moines IA 50309-2000 Transac	30402.00 ction ID : VSGDK9TM316		
Purpose of Expenditure	of Disbursement or Obligation		
Lategory Category	10 21 2016		
Name of Federal Candidate Support Office Sought	t: 🗶 House District: 10		
Dold, Jr., Robert James, , ,	ent Senate State: IL		
Calendar Year-To-Date Per Election for Office Sought Disbursement 2016 Ot	t For:		
(a) OUDTOTAL of them is added as a deat Emparathment			
(a) SUBTOTAL of Itemized Independent Expenditures	61310.70		
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 6		
(c) TOTAL Independent Expenditures	7 1 7 1 7 1		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Foucart, Brian, , , [Electronically Filed] Date 10	21 / 2016		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	LINDITOTILO	PAGE 4 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
End Citizens United		C C00573261
		O statistic
Check if 24-hour report 48-hour report Ne	ew report Amends report f	iled on DDD / YTYTY
Full Name of Payee Wildfire Contact LLC		Date of Public Distribution/Dissemination
Mailing Address 400 E Court Ave		10
Ste 126		Amount
City State	Zip Code	27749.61
Des Moines IA	50309-2000	Transaction ID: VSGDK9TM6D7 Date of Disbursement or Obligation
Purpose of Expenditure Printing and postage (estimated)	Category/ Type	10 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support O	ffice Sought: House District: 00
TOOMEY, PATRICK JOSEPH, , ,	X Oppose	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		isbursement For: Primary General Other (specify)
Full Name of Payee	·	Date of Public Distribution/Dissemination
		M = M / D = D / Y = Y = Y
Mailing Address		Amount
City	7:- Code	
City State	Zip Code	
Purpose of Expenditure		Date of Disbursement or Obligation
Turpose of Experiantific	Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate	Support O	office Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	D	oisbursement For:
	,	Girler (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		27749.61
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	······	414708.36
Under penalty of perjury I certify that the independent expend with, or at the request or suggestion of, any candidate or auth party committee) any political party committee or its agent.		
	[lectronically Filed] Date	10 21 2016
Signature		